

Head and Spinal Cord Injury (HASCI) Waiver

South Carolina Department of Disabilities and Special Needs

HASCI Medicaid Waiver

Section 1915(c) of the Social Security Act enables the South Carolina Department of Health and Human Services (SCDHHS) to collaborate with the SCDDSN Head and Spinal Cord Injury (HASCI) Division to operate a Home and Community-Based (HCB) Waiver program for a limited number of people with severe physical/cognitive disabilities. It is one of six HCB Waivers in South Carolina which people with traumatic brain injury, spinal cord injury, or similar disability may qualify for.

HASCI Waiver participants receive Medicaid-funded services and supports in their homes and in community settings instead of in a hospital, nursing facility, or institution.

The annual aggregate cost of HASCI Waiver services must be less than or equal to the annual aggregate costs of corresponding institutional care for the equivalent number of persons.

HASCI Waiver services are provided based on assessed needs of a participant and within limits related to available funding.

HASCI Waiver Participation

To participate in the Head and Spinal Cord Injury Waiver, a person must:

- ✓ receive Service Coordination through the SCDDSN Head and Spinal Cord Injury (HASCI) Division (see back)
- ✓ request HASCI Waiver services through his or her HASCI Service Coordinator
- become eligible for Medicaid or already qualify for Medicaid
- ✓ meet Level of Care criteria (see back)
- ✓ have urgent circumstances affecting his or her health or functional status
- depend on others to provide or assist with critical health needs, basic activities of daily living, or require daily monitoring or supervision to avoid institutionalization
- ✓ need services or assistance not available from existing resources, including family, private funds, and other agencies/programs; or such current resources are inadequate to meet basic needs of the individual to allow him or her to remain at home
- have adequate natural supports to live safely in a private home or other community setting with limited HASCI Waiver services.

The HASCI Waiver does <u>not</u> provide housing, room and board, or 24-hour care/general supervision in a private residence.

Initial enrollment in the HASCI Waiver is limited to people **prior to their 65th birthday**. Persons already enrolled continue to be eligible after their **65th birthday**, if all other eligibility factors are met.

A person must be informed of all the alternatives available in the HASCI Waiver, offered choice between institutional services or home and community-based services, choose to receive HASCI Waiver services, and offered choice among qualified providers.

HASCI Waiver Services

- ▶ <u>Attendant Care/Personal Assistance Services</u>: assistance with personal care and activities of daily living
- Respite Care: short-term care provided in the absence of or for the relief of persons normally providing care
- ► <u>Medicaid Waiver Nursing</u>: services within the scope of the SC Nurse Practice Act provided by an RN or LPN
- <u>Prescribed Drugs</u>: allows an additional three prescriptions in addition to the Medicaid State Plan limit of four
- ► <u>Medical Supplies, Equipment and Assistive technology</u>: specialized medical supplies and equipment that enable an individual to better perform activities of daily living
- ► <u>Communication Services</u>: speech therapy, audiological and augmentative communication services
- Occupational Therapy Services: treatment prescribed by a physician to develop, restore or improve functional abilities
- Physical Therapy Services: treatment prescribed by a physician to prevent, alleviate, or compensate for movement dysfunction and related functional problems
- <u>Psychological Services</u>: Services that address affective, coanitive and substance abuse issues
- <u>Behavioral Support Services</u>: use of validated practices to identify causes of specific problem behaviors and appropriate interventions
- Personal Emergency Response System: electronic device that enables an individual to secure help in an emergency
- ► <u>Residential Habilitation</u>: services include care, skills training and supervision in a non-institutional setting
- <u>Day Habilitation</u>: assistance with acquisition, retention, or improvement of self-help, socialization and adaptive skills, in a non-residential DDSN licensed facility
- Prevocational Services: preparation for paid or unpaid employment, but not directed at teaching job-specific skills
- Supported Employment Services: intensive/extended employment supports to individuals for whom employment at or above the minimum wage is unlikely
- <u>Private Vehicle Modifications</u>: modifications to a vehicle to be driven by or routinely used to transport the individual
- ► Environmental Modifications: adaptations to ensure the health, welfare, and safety of the individual or that afford the individual areater independence in the home
- ▶ Health Education for Consumer-Directed Care: instruction by a registered nurse to assist individuals who desire to manage their own personal care. For individuals not capable of self-management, family members may be instructed
- Peer Guidance for Consumer-Directed Care: information, advice, and encouragement for individuals with SCI/severe physical impairment to recruit, train and supervise attendant care/personal assistance providers

HASCI Division Information and Referral

Applying for DDSN Services

If you have a severe impairment as a result of traumatic brain injury (TBI), spinal cord injury (SCI), or similar disability (SD), you or a family member should:

- Contact HASCI Division Information and Referral at the phone number above to be screened for referral to SCDDSN Head and Spinal Cord Injury (HASCI) Division.
- If you are screened as appropriate consideration of eligibility, you will be given opportunity to choose a DSN Board or other qualified agency which provides HASCI Service Coordination for your locality. You will be notified by mail that this referral has been made to the provider you choose.
- The local DSN Board or other qualified provider will initiate formal intake and SCDDSN eligibility determination. The applicant will be contacted by staff from the DSN Board to begin this process.
- ➤ The SCDDSN eligibility determination process includes review of medical records and other information, including the applicant's current functional status. The process is usually completed within 90 days.
- An applicant found ineligible for SCDDSN will be notified in writing, including reason(s) for denial. This notification will provide inform

Eligibility Criteria

S.C. Code Ann. §44-38-370 defines eligibility for services through the DDSN Head and Spinal Cord Injury Division:

"A person is <u>eligible for case management services</u> under this article when at the time of determining eligibility the person has a severe chronic limitation that:

- (1) is attributed to a physical impairment, including head injury, spinal cord injury, or both, or a similar disability, regardless of the age of onset but not associated with the process of a progressive degenerative illness or dementia, or a neurological disorder related to aging;
- (2) is likely to continue without intervention;
- (3) results in substantial functional limitations in at least two of these life activities: (a) self-care; (b) receptive and expressive communication; (c) learning; (d) mobility; (e) self-direction; (f) capacity for independent living; (g) economic self-sufficiency; and
- (4) reflects the person's need for a combination and sequence of special interdisciplinary or generic care or treatment or other services which are lifelong or extended duration and are individually planned or coordinated."

Level of Care Criteria for HASCI Waiver

In order to be eligible for HASCI Waiver Services, an individual must meet Level of Care criteria for a Nursing Facility (NF) or Intermediate Care Facility for Persons with Intellectual and Developmental Disabilities (ICF/ID). The individual must be evaluated to meet Level of Care criteria within 30 days prior to his/her enrollment in the HASCI Waiver. Level of Care is re-evaluated as often as indicated, but at least every 365 days.

NF Level of Care is determined through a comprehensive screening process of an individual's medical, psychobehavioral and functional needs. An individual may meet NF Level of Care at the skilled or intermediate level. Both levels focus on an individual's need for extensive assistance from another person with personal care and activities of daily living.

To be eligible for the HASCI Waiver under the ICF/ID Level of Care, an individual must be determined to meet SCDDSN criteria for a Related Disability (onset prior to age 22 years) with substantial impairments and require ongoing supervision and services to acquire skills or prevent regression.

DDSN Reconsideration and Medicaid Appeal

If an applicant or participant is notified of an adverse decision/action affecting eligibility for or receipt of HASCI Waiver services, within 30 days the individual (or representative) may request that SC Department of Disabilities and Special Needs reconsider and reverse the decision/action. Information on the SCDDSN Reconsideration process and how to make a request will be provided by the HASCI Service Coordinator.

If the individual (or representative) fully completes the SCDDSN Reconsideration process and is dissatisfied with the results, an appeal of the adverse decision/action may be filed with the SC Department of Health and Human Services (State Medicaid Agency) within 30 days. Information on how to file a Medicaid appeal will be provided by the HASCI Service Coordinator.

You may be eligible to receive continued Medicaid benefits pending a hearing decision. If you are interested in continued benefits, you must contact your SCDDSN Service Coordinator within ten (10) calendar days of the effective date of the action. If the hearing decision is not in your favor, you may be required to repay Medicaid benefits received during the appeals process.

HASCI Waiver Termination

HASCI Waiver services are terminated when a person...

- ✓ is no longer eligible for Medicaid in South Carolina
- ✓ no longer meets Level of Care criteria
- ✓ is admitted to a nursing facility or ICF/ID-DD
- ✓ does not receive any Waiver services for 30 days.
- ✓ voluntarily withdraws from receiving services
- ✓ moves out of South Carolina
- ✓ is admitted to an acute care hospital for more then 30 days